



**REVOCATION OF POWER OF ATTORNEY
WITH NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number: 10/005,105

Filing Date: December 3,-2001

First Named Inventor: PAUL C. KOCHER

Art Unit: 2132

Examiner Name: not yet known

Attorney Docket Number: 44424162-8721(new) 24162-08721(old)

I hereby revoke all previous powers of attorney given in the above-identified application

☒ I hereby appoint the practitioners associated with the customer number: 26263

☒ Please change the correspondence address for the above-identified application to the address associated with Customer Number: 26263

I am the:

☐ Applicant/Inventor

☒ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB96)

SIGNATURE of Applicant or Assignee of Record

Name: CRYPTOGRAPHY RESEARCH, INC.
By: Paul C. Kocher, President

Signature: 

Telephone: (415) 397-0123

Date: Oct. 13, 2004

NOTE: Signatures of all the inventors or assignees of record of the entire interest of their representative(s) are required. Submit multiple forms if more than one signature is required.

Total of _____ forms are submitted



STATEMENT UNDER 37 CFR 3.73 (b)

Applicant/Patent Owner: Cryptography Research, Inc.

Application No.: 10/005,105 Filing Date: December 3, 2001

Patent No.: n/a Issue Date: n/a

Entitled: DIFFERENTIAL POWER ANALYSIS METHOD AND APPARATUS

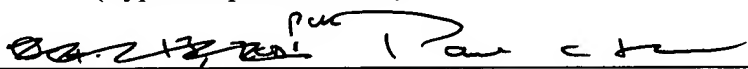
Cryptography Research, Inc, a Corporation
(Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university etc....)

States that it is:

The assignee of the entire right, title, and interest in the above-identified application by assignment dated _____, which assignment is ☒ recorded in the U.S. Patent and Trademark Office on January 18, 2002 at Reel 012558 Frame 0761 or ☐ attached hereto.

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

NAME: PAUL C. KOCHER
(Typed or printed name)

SIGNATURE: 

TITLE: President

TELEPHONE NUMBER: (415) 397-0123

DATE: Oct. 13 2004

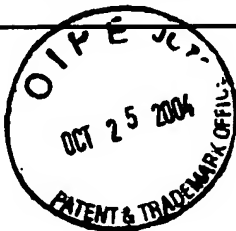
2132

PTO/SB/92 (08-03)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

**Certificate of Mailing under 37 CFR 1.8**

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to:

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

on October 21, 2004.
Date

Signature

Marsha A. Townsend

Typed or printed name of person signing Certificate

Note: Each paper must have its own certificate of mailing, or this certificate must identify each submitted paper.

Attorney Docket No. 44424162-8721

Application No. 10/005,105

1. Revocation of Power of Attorney with New Power of Attorney and Change of Correspondence Address;
2. Statement Under 37 CFR 3.73(b); and,
3. Return Receipt Postcard.

This collection of information is required by 37 CFR 1.8. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 1.8 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing this form, call 1-800-PTO-9199 and select option 2.